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DATE June 20, 2007

NAME Mail Stop RCE

COMPANY United States Patent and Trademark Office

YOUR REF NO. Application No. 09/776,412

FAX NUMBER 571-273-8300

INTELLECTUAL PROPERTY ATTORNEYS
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FROM Jason Jackson

OUR REFERENCE NO. 01153.0001U2

OUR FAX NUMBER 678-420-9301

NUMBER OF PAGES 26 (Including Cover Page)

Please see attached:

1. Transmittal Letter (2 Pages)
2. Request for Continued Examination (RCE) Transmittal (1 Page)
3. Response Accompanying a Request for Continued Examination (RCE) (19 Pages)
4. Request for Extension of Time (2 Pages)
5. PTO-2038 Credit Card Form in the amount of \$1,475.00 (1 Page)

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ATTORNEY DOCKET NO. 01153.0001U2
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of)
 SCHULTZ et al.) Group Art Unit: 3691
 Application No.: 09/776,412) Examiner: Havan, Thu Thao
 Filing Date: February 2, 2001) Confirmation No.: 4078
 For: ELECTRONIC TRANSACTION)
 RECEIPT SYSTEM AND METHOD)

TRANSMITTAL LETTER

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer Number 23859

June 20, 2007

Sir:

Transmitted herewith are the following in the above-identified application:

<input checked="" type="checkbox"/> Response Accompanying RCE	<input checked="" type="checkbox"/> RCE Transmittal
<input checked="" type="checkbox"/> Fee as calculated below	<input checked="" type="checkbox"/> Petition to Extend Time
<input type="checkbox"/> No Additional Fee Required	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Replacement Drawings	<input type="checkbox"/> Other _____

CLAIMS AS AMENDED						
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE
Total Claims		21	24	X \$50.00		\$0.00
Independent Claims		3	4	X \$200.00		\$0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$360.00		\$0.00
<input checked="" type="checkbox"/> Request for Continued Examination (RCE) Fee				+ \$790.00		\$790.00
EXTENSION FEE	1 st Month \$120 <input type="checkbox"/>	2 nd Month \$450 <input type="checkbox"/>	3 rd Month \$1020 <input type="checkbox"/>	4 th Month \$1590 <input type="checkbox"/>	5 th Month \$2160 <input checked="" type="checkbox"/>	\$2160.00
<input checked="" type="checkbox"/> Reduction by 1/2 for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -						-\$1475.00
TOTAL FEE DUE						\$1475.00

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**ATTORNEY DOCKET NO. 01153.0001U2
APPLICATION NO. 09/776,412**

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Payment:

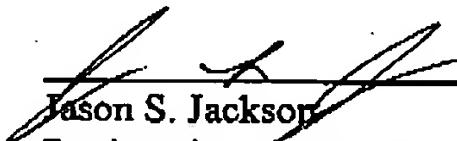
JUN 20 2007

- A check in the amount of \$ _____ is enclosed.
- Payment by credit card in the amount of \$1475.00 for the fees designated below. (Form PTO-2038 enclosed).

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$ _____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.

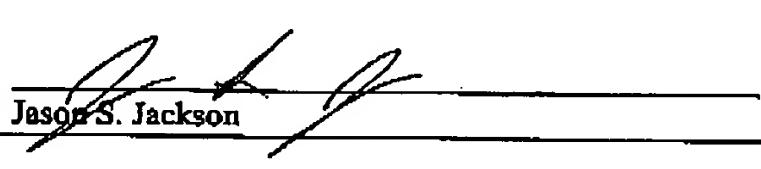


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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence, including any items indicated as attached or included, is being transmitted via facsimile transmission to Mail Stop RCE, Commissioner for Patents at (571) 273-8300, on the date indicated below.



Jason S. Jackson

6-20-2007

Date

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